

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Novo Nordisk PAC

ADDRESS (number and street)

500 New Jersey Avenue NW

Suite 350

☐ Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00424838

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report(Q1)
- ☐ July 15
Quarterly Report(Q2)
- ☐ October 15
Quarterly Report(Q3)
- ☐ January 31
Quarterly Report(YE)
- ☒ July 31 Mid-Year
Report(Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Mawby

Signature of Treasurer

Electronically Filed by Michael Mawby

Date

03

16

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		8563.62
(b) Cash on Hand at Beginning of Reporting Period	8563.62	
(c) Total Receipts (from Line 19)	19932.00	19932.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28495.62	28495.62
7. Total Disbursements (from Line 31)	18749.19	18749.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9746.43	9746.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Novo Nordisk PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11380.00	11380.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	8552.00	8552.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	19932.00	19932.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	19932.00	19932.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19932.00	19932.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19932.00	19932.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	499.19	499.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	499.19	499.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18250.00	18250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18749.19	18749.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18749.19	18749.19

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19932.00	19932.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19932.00	19932.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	499.19	499.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	499.19	499.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 97

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - NORTH CA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 4 / 2 0 0 7

Transaction ID: 03404-92893618345261

Amount of Each Receipt this Period

480.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-1-15-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-1-10-40

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-34-14-47

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-1-17-12

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-1-14-42

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 8 / 97

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-1-17-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-1-16-28

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-2-14-42

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-2-17-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-2-16-28

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-3-15-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-3-10-40

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-36-14-47

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-3-17-12

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-3-14-42

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-3-17-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-3-16-28

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-5-15-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-5-10-40

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-38-14-47

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-5-17-12

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-5-14-42

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-5-17-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR CORPORATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-5-16-28

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NNRUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-7-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NNRUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-7-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NNRUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-7-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - IT SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-8-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - IT SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-8-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - IT SECURITY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-8-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR SAE - NATIONAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-9-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR SAE - NATIONAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-9-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR SAE - NATIONAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-9-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-10-15-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-10-10-40

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-43-14-47

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-10-17-12

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-10-14-42

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-10-17-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - QUALITY ASSURANCE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-10-16-28

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AVP - IT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-11-13-21

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-11-15-15

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-11-15-50

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-11-15-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-11-10-40

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-44-14-47

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-11-17-12

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-11-14-42

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-11-17-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
AVP - IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-11-16-28

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GHTM - DETROIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-13-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GHTM - DETROIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-13-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GHTM - DETROIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-13-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-14-13-21

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-14-15-15

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-14-15-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	7

Transaction ID: 20070412-14-15-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	7

Transaction ID: 20070419-14-10-40

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 20070504-47-14-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-14-17-12

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-14-14-42

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-14-17-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-14-16-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - CLIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-15-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - CLIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-15-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MGR - CLIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-15-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - BUSINESS RELATIONSHIP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-16-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - BUSINESS RELATIONSHIP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-16-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - BUSINESS RELATIONSHIP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-16-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - PORTLAND ME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-17-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - PORTLAND ME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-17-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - PORTLAND ME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	7

Transaction ID: 20070702-17-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

CHIEF IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	0	7

Transaction ID: 20070601-18-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

CHIEF IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	0	7

Transaction ID: 20070621-18-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

CHIEF IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-18-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

George P. Hampton

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - OHIO VALLEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-19-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

George P. Hampton

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - OHIO VALLEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-19-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

George P. Hampton

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - OHIO VALLEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-19-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-20-13-21

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-20-15-15

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 20070322-20-15-50

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	7

Transaction ID: 20070412-20-15-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	0	7

Transaction ID: 20070419-20-10-40

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-53-14-47

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-20-17-12

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-20-14-42

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-20-17-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSD DIABETES - CALIFORNIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-20-16-28

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-21-15-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-21-10-40

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-54-14-47

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-21-17-12

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-21-14-42

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-21-17-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

GAE II - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-21-16-28

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-22-13-21

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-22-15-15

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-22-15-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-22-15-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-22-10-40

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-55-14-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-22-17-12

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-22-14-42

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-22-17-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-22-16-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-23-15-15

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-23-15-50

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-23-15-18

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-23-10-40

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-56-14-47

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-23-17-12

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-23-14-42

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-23-17-18

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - GREAT LAKES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-23-16-28

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-24-13-21

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-24-15-15

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-24-15-50

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-24-15-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-24-10-40

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-57-14-47

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

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FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-24-17-12

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

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NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-24-14-42

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A.

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Joseph F. Kelly

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City

Princeton

State

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08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-24-17-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - FLORIDA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-24-16-28

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DBM II - KANSAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-25-14-42

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DBM II - KANSAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-25-17-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DBM II - KANSAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-25-16-28

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Samuel B. Marshall

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - NORDITROPIN MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-26-14-42

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Samuel B. Marshall

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - NORDITROPIN MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-26-17-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Samuel B. Marshall

Mailing Address 100 College Rd. W

City

Princeton

State

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Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - NORDITROPIN MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-26-16-28

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-27-13-21

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-27-15-15

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-27-15-50

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-27-15-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

Michael L. Mawby

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C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	7

Transaction ID: 20070419-27-10-40

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 20070504-60-14-47

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

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federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	7

Transaction ID: 20070521-27-17-12

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-27-14-42

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-27-17-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-27-16-28

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-28-13-21

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-28-15-15

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-28-15-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-28-15-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-28-10-40

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-61-14-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-28-17-12

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-28-14-42

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-28-17-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

RBD - ROCKY MOUNTAIN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-28-16-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-30-13-21

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-30-15-15

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 20070322-30-15-50

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	7

Transaction ID: 20070412-30-15-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	0	7

Transaction ID: 20070419-30-10-40

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-63-14-47

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-30-17-12

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-30-14-42

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Novo Nordisk PAC

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Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

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FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-30-17-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-30-16-28

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - CONNECTICUT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-31-14-42

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 97

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - CONNECTICUT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-31-17-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - CONNECTICUT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-31-16-28

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-32-13-21

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-32-15-15

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-32-15-50

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-32-15-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-32-10-40

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-65-14-47

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-32-17-12

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-32-14-42

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-32-17-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - GLOBAL CMO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-32-16-28

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSL DIABETES - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-33-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSL DIABETES - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-33-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

MSL DIABETES - NEW ENGLAND

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-33-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-34-15-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-34-10-40

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-67-14-47

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-34-17-12

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-34-14-42

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-34-17-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-34-16-28

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Raymond F. Polakowski

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DBM II - CINCINATTI OH

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: 43b6c2de54d445e14e2

Amount of Each Receipt this Period

480.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-35-13-21

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

565.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-36-15-15

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-36-15-50

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-36-15-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-36-10-40

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-69-14-47

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-36-17-12

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-37-14-42

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-37-17-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-37-16-28

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - LOUISIANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-38-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - LOUISIANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-38-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - LOUISIANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-38-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - ROCKY MOUNT NC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-39-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - ROCKY MOUNT NC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-39-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DBM - ROCKY MOUNT NC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-39-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CONTRACT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-40-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CONTRACT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-40-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

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NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

DIR - CONTRACT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-40-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-41-14-42

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-41-17-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-41-16-28

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-40-13-21

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-41-15-15

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-41-15-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	7

Transaction ID: 20070412-41-15-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	7

Transaction ID: 20070419-41-10-40

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 20070504-74-14-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-41-17-12

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-42-14-42

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-42-17-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

BRD - SOUTHEAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-42-16-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-43-13-21

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-44-15-15

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 20070322-44-15-50

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	7

Transaction ID: 20070412-44-15-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	0	7

Transaction ID: 20070419-43-10-40

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-76-14-47

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-43-17-12

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-44-14-42

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-44-17-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-44-16-28

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-46-15-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-45-10-40

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-78-14-47

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-45-17-12

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

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Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-46-14-42

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-46-17-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

SR IP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-46-16-28

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: 20070223-45-13-21

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 20070308-46-15-15

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 20070322-46-15-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-47-15-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-46-10-40

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-79-14-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-46-17-12

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-47-14-42

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-47-17-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - BIOPHARMACEUTICALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-47-16-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-49-14-42

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-49-17-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

AE II - GREAT LAKES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-49-16-28

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 20070412-48-15-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 20070419-47-10-40

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 20070504-80-14-47

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20070521-47-17-12

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 20070601-48-14-42

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: 20070621-48-17-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 20070702-48-16-28

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

11380.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 / 97

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Novo Nordisk Inc

Mailing Address 100 College Road West

City
Princeton

State
NJ

Zip Code
08540

Purpose of Disbursement
Operating Expenditures

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: V29748-2173578143119

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

319.19

SUBTOTAL of Disbursements This Page (optional)

319.19

TOTAL This Period (last page this line number only)

319.19

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Bob Etheridge for Congress Committee

Mailing Address Post Office Box 28001

City Raleigh State NC Zip Code 27611

Purpose of Disbursement
Contribution P2008

Candidate Name
Bob Etheridge

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: 20543-7062188982963
Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

250.00

B. Full Name (Last, First, Middle Initial)
Citizens for Arlen Specter

Mailing Address 111 S 15th Street
Packard Building 7th Floor

City Philadelphia State PA Zip Code 19102-2625

Purpose of Disbursement
Contribution P2008

Candidate Name
Arlen Specter

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Transaction ID: 42281-1640588641166
Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Citizens for Harkin

Mailing Address PO Box 811

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
Contribution P2008

Candidate Name
Tom Harkin

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Transaction ID: 29748-9873010516166
Date of Disbursement

03 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Citizens for Harkin	Transaction ID: 29748-7273370623588 Date of Disbursement																				
Mailing Address PO Box 811	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	0	7												
City Des Moines State IA Zip Code 50304	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution P2008	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Tom Harkin	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Diana Degette for Congress Inc.	Transaction ID: 29748-3768426775932 Date of Disbursement																				
Mailing Address PO Box 61337	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	7												
City Denver State CO Zip Code 80206	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution P2008	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Diana DeGette	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Engel for Congress	Transaction ID: 29748-1531183123588 Date of Disbursement																				
Mailing Address 462 California Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	7												
City Bronxville State NY Zip Code 10708	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution P2008	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Eliot Engel	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 17	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Enzi for Us Senate Mailing Address PO Box 2775	Transaction ID: 98169-4480249285697 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2007</div> </div>
City CODY State WY Zip Code 82414 Purpose of Disbursement Contribution P2012 Candidate Name Michael Enzi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WY District:	Amount of Each Disbursement this Period <div>2000.00</div> <div>011</div> Category/Type
B. Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign Mailing Address PO Box 16128 City Houston State TX Zip Code 77222 Purpose of Disbursement Contribution P2008 Candidate Name Gene Green Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 29	Transaction ID: 29748-1908075213432 Date of Disbursement <div> <div>05</div> <div>21</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>2000.00</div> <div>011</div> Category/Type
C. Full Name (Last, First, Middle Initial) Hooley for Congress Mailing Address PO Box 2050 City Salem State OR Zip Code 97308 Purpose of Disbursement Contribution P2008 Candidate Name Darlene Hooley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05	Transaction ID: 20543-7279321551323 Date of Disbursement <div> <div>06</div> <div>27</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Hoyer for Congress	Transaction ID: 29748-5175439715385 Date of Disbursement
Mailing Address 7905 Malcolm Road Suite 102	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 7</div> </div>
City Clinton State MD Zip Code 20735	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution P2008	<div>2000.00</div>
Candidate Name Steny Hoyer	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) John D. Dingell for Congress Committee	Transaction ID: 29748-7812158465385 Date of Disbursement
Mailing Address 607 14th Street N.W. Suite 800	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 1 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution P2008	<div>2000.00</div>
Candidate Name John Dingell	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Pat Roberts for Senate	Transaction ID: 98049-1464349627494 Date of Disbursement
Mailing Address PO Box 433	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 7</div> </div>
City Great Bend State KS Zip Code 67530	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution P2008	<div>1000.00</div>
Candidate Name Pat Roberts	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Shore Pac

Mailing Address PO Box 3157

City State Zip Code
Long Branch NJ 07740

Purpose of Disbursement
Contribution 2007

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

Transaction ID: 42281-5139276385307
Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Tim Murphy for Congress

Mailing Address PO Box 24551

City State Zip Code
Pittsburgh PA 15234

Purpose of Disbursement
Contribution P2008

Candidate Name
Timothy Murphy

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 18

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 98169-6642114520073
Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

18250.00

Image# 28930818153

Form/Schedule: **F3X**

Transaction ID:

Report reflects outcome of extensive review of PAC records. Amended report adds the payroll for Jan 12 2007 and adjusts the dates for the June payroll to properly reflect the pay dates.
